

CSAP

April 1995

Alcohol, Tobacco, and Other Drugs Resource Guide

Healthcare Providers

From the Director of CSAP..

As doctors, nurses, psychotherapists, and other healthcare providers, you, more than most professionals, have a great opportunity to help prevent, identify, and treat alcohol, tobacco, and other drug problems among the people in your community. And as the country is suffering from the appalling effects of these drugs, you cannot allow such an important opportunity to pass you by.

This guide is designed to assist you in your efforts to serve your patients. It contains prevention resources that offer support and guidance, research showing the latest successes in the field, and organizations you may contact for more information. It also contains materials that you may place in your waiting rooms. We at CSAP look forward to working with you, America's healthcare providers, in our mutual quest for a healthier tomorrow.

Line M. Johnson, Ph.D.

Office of Minority Health

Resource Center

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Substance Abuse and Mental Health Services Administration
SAMHSA



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service

The listing of materials or programs in this resource guide does not constitute or imply endorsement by the Center for Substance Abuse Prevention, the Public Health Service, or the Department of Health and Human Services. The materials have been reviewed for accuracy, appropriateness, and conformance with public health principles.

This Alcohol, Tobacco, and Other Drugs Resource Guide was compiled from a variety of publications and data bases and represents the most current information to date. It is not an all-inclusive listing of materials on this topic. This guide will be updated regularly, and your comments or suggestions are welcome. To suggest information or materials that might be included in updated editions, please write to the **National Clearinghouse for Alcohol and Drug Information (NCADI)**, P.O. Box 2345, Rockville, MD 20847-2345.

Produced by CSAP's National Clearinghouse for Alcohol and Drug Information, Karen Zuckerman, editor, and Peggy Lytton, publications manager.

For further information on alcohol, tobacco, and other drugs, call 1-800-729-6686, 301-468-2600, or TDD 1-800-487-4889.



Please feel free to be a "copy cat," and make all the copies you want. You have our permission!

Materials for Healthcare Providers

Alcoholic Hepatitis

Format: Booklet

Length: 7 Pages

Topic: Alcohol and Health

Target Audience: General Public and Healthcare Providers

Setting: Healthcare and Home

Inventory No.: PH243

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847; 1-800-729-6686

This booklet, designed for emergency physicians, family practitioners, general internists, physicians' assistants, and nurse practitioners, provides information about alcoholic hepatitis including mortality data and major causes for medical under-recognition of the disease. The review describes alcoholic hepatitis, diagnostic methods, its pathological and clinical course, management, and followup. References are also included.

To Care Enough: Intervention with Chemically Dependent Colleagues. A Guide for Healthcare and Other Professionals

Year: 1989

Format: Book

Length: 291 Pages

Topic: Alcohol and Other Drugs, Prevention, Intervention, and Treatment

Target Audience: AOD Prevention and Treatment Professionals and Healthcare Providers

Setting: Healthcare

Readability: Fairly Difficult

Inventory No.: PO36

Availability: Johnson Institute, 7205 Ohms Lane, Minneapolis, MN 55439-2159; 612-831-1630, 1-800-231-5165

T*o Care Enough* offers an easy, step-by-step guide to help professionals intervene with their colleagues who have an alcohol or other drug problem. The book looks at the problem of chemical dependence, examines enabling as a major block to treatment, and spells out a four-phase model for successful intervention. Appendices focus on forms of treatment, "Return-to-Work Contracts," and resources for additional help and information.

MICA: Problems and Solutions in Treating the Mentally Ill/Chemically Addicted

Year: 1989

Format: VHS Video

Length: 28 Minutes

Topic: Alcohol and Other Drugs and Intervention/Treatment

Target Audience: AOD Treatment Professionals, Public, and Healthcare Providers

Setting: Community Organization and Healthcare

Availability: Avator Productions, Dockx Design, P.O. Box 1019, Camden, ME 04843; 1-800-982-9353

This video looks at the issues facing mentally ill/chemically addicted (MICA) clients. The video states that because many MICA patients "fall between the cracks," the mental health and substance abuse fields must increase their communication regarding these clients. Three MICA patients discuss the problems they have encountered in their treatment programs because of their dual diagnosis.

Project ADEPT: Alcohol and Drug Education for Physician Training

Year: 1989

Format: Classroom Material and VHS Video

Length: 308 Pages, 19 Minutes

Context: Part of a Packet/Program

Topic: Alcohol and Other Drug Prevention, Intervention, and Treatment

Target Audience: Healthcare Providers

Setting: School

Readability: Difficult

Availability: Center for Alcohol Studies,
Brown University, Box G-BH, Providence, RI
02912, 401-863-7791

Project ADEPT is a comprehensive teaching model for alcohol and other drug (AOD) abuse education. Four separate volumes are available, each containing a videotape and over 300 pages of teaching materials.

- Volume I, *Core Modules*, provides an introduction and overview and looks at prevention, assessment and diagnosis, and initiating treatment.
- Volume II, *Special Topics*, discusses adolescent AOD use, the OB/GYN patient, health professional impairment, and nicotine dependence.

- Volume III, *AIDS and Substance Abuse*, looks at patient counseling, screening for AIDS and AOD abuse, and HIV testing.
- Volume IV, *Special Populations*, studies issues about race, culture, and ethnicity, children of alcoholics, and geriatrics.

ABA/AMA...Join Us in a New Kind of Partnership...Uniting Lawyers, Doctors, Teachers, Parents, Youth Against Drug Abuse

Year: 1990

Format: VHS Video

Length: 22 Minutes

Context: Part of a Packet/Program

Topic: Alcohol and Other Drugs and Prevention

Target Audience: Healthcare Providers, Physicians, and Lawyers

Setting: School

Availability: Financial Services, American Bar Association, 750 North Lake Shore Drive, Chicago, IL 60611, 312-988-5522

This kit is designed to promote partnerships between doctors and lawyers in community AOD prevention efforts. Containing a communications package and a video, the kit explains how doctors and lawyers can work together and convey the medical and legal issues surrounding alcohol and other drug (AOD) use to youngsters in community schools. The kit includes a volunteer activation plan, a script for a school presentation, resource materials on AOD, and a review of American Medical Association (AMA) policies on substance abuse.

About Stress and the Health-Care Worker

Year: 1991

Format: Booklet

Length: 15 Pages

Topic: Alcohol and Other Drugs and Prevention

Target Audience: Employees, Employers, and Healthcare Providers

Setting: Healthcare and Worksite

Readability: Average

Availability: Channing L. Bete Co., Inc., 200 State Road, South Deerfield, MA 01373; 1-800-628-7733

This booklet examines the unique demands placed on healthcare providers and discusses the physical, mental, and emotional effects of excessive stress. It suggests several techniques for reducing stress levels such as relaxation exercises, effective communication, and proper nutrition. The brochure states that chemical dependency is never a solution to stress and urges healthcare providers to seek help if a problem arises.

Late Onset Alcoholism: A Training Model for Formal and Informal Caregivers

Year: 1991

Format: Book

Length: 400 Pages

Topic: Alcohol and Other Drugs and Intervention/Treatment

Mode of Delivery: Instructor-led

Target Audience: AOD Prevention and Treatment Professionals and Healthcare Providers

Setting: Healthcare

Readability: Fairly Difficult

Availability: Western Reserve Geriatric Education Center, 12200 Fairhill Road, Cleveland, OH 44120; 216-368-5433

This training program is designed to help healthcare providers combine their studies of alcoholism and aging into one comprehensive discipline. The program seeks to educate students about various issues surrounding AOD and the elderly, including theories, treatment philosophies, and services specific to this population. The program is divided into three curricula that can be taught independently or as a sequential package: alcohol curriculum, aging curriculum, and alcohol and aging curriculum.

The Physician Does Make a Difference: Recognizing the Faces of Alcohol and Other Drug Abuse

Year: 1991

Format: VHS Video

Length: 21 Minutes

Topic: Alcohol and Other Drug Prevention, Intervention, and Treatment

Target Audience: Healthcare Providers

Setting: Healthcare and Worksite

Inventory No.: VHS42

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847; 1-800-729-6686

This video, intended for use by a physician educator with some background in alcohol and other drug (AOD) abuse, shows healthcare providers the "difference" they can make in the lives of their patients. The video was developed to raise awareness of AOD abuse, motivate physicians to become involved in the recognition and management of AOD problems in their patients, and encourage physicians to take an active role in the education of their patients and communities on AOD issues.

About Chemical Dependency and the Health-Care Worker

Year: 1991

Format: Booklet

Length: 15 Pages

Topic: Alcohol and Other Drugs and Prevention

Target Audience: Healthcare Providers

Setting: Healthcare

Readability: Easy

Availability: Channing L. Bete Co., Inc.; 200 State Road, South Deerfield, MA 01373; 1-800-628-7733

This brochure looks at why healthcare workers are at risk for alcohol and other drug (AOD) problems and explains the signs of chemical dependency. The brochure urges healthcare professionals to seek help if they have an AOD problem and to offer help if a colleague shows signs of chemical dependence. Healthy coping skills are listed as are resources for further information.

Identification and Referral of Children of Alcoholics

Year: 1992

Format: VHS Video with Leader's Guide

Length: 30 Minutes

Topic: Alcohol and Prevention, Intervention, and Treatment

Target Audience: Healthcare Providers

Setting: Healthcare

Availability: Children of Alcoholics Foundation, Inc., New York, NY 10163-4185; 1-800-359-COAF

This training program, which contains a video and manual, is designed to help medical professionals identify and refer children of alcoholics (COAs). The video contains two vignettes between patients, a teenage COA and an adult child of an alcoholic, and their doctors.

Although the patients initially complain of physical problems, it becomes clear after physician questioning that their symptoms are linked to distress resulting from being a COA. The accompanying manual provides facts and common experiences of COAs, discussion points related to the video, current research on the subject, and ideas on how to develop a resource list.

Alcohol, Tobacco, and Other Drugs Resource Guide

Year: 1990-1994

Format: Guide

Length: Varies

Topic: Varies, see below

Target Audience: Varies, see below

Setting: Target Population or Healthcare

Readability: Average

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847; 1-800-729-6686

Resource guides, similar to this one, have been published on several target populations. Most guides follow the same format: prevention material that is available and related to the topic; studies, articles and reports covering the topic; and relevant groups, organizations, and programs. The following guides are currently available and target specific populations that healthcare providers may be responsible for: African Americans (MS459), American Indians/Native Alaskans (MS419), Asian and Pacific Islander Americans (MS408), College Youth (MS418), Elementary Youth (MS421), Lesbians, Gay Men, and Bisexuals (MS489), Older Americans (MS443), People with Disabilities (MS461), Pregnancy: Women Teenagers and Their Infants (MS420), Rural Communities (MS416), Women

(MS433), Youth in Low Income Urban Environments (MS446) and Hispanic Americans (MS441).

Alcoholism Tends to Run in Families

Year: Reprinted 1993

Format: Brochure

Length: 5 panels

Topic: Children of Alcoholics

Target Audience: Healthcare Professionals

Setting: Healthcare

Inventory No.: PH318

Availability: National Clearinghouse for
Alcohol and Drug Information, P.O. Box
2345, Rockville, MD 20847; 1-800-729-6686

This brochure describes the commonalities and experiences of children of alcoholics (COAs), who are at high risk for alcohol and other drug problems

partly because of genetics and partly because of environmental (i.e., childhood) factors. Healthcare professionals are encouraged to help COAs make positive adjustments to their families' alcoholism by talking about feelings, being a compassionate listener, sharing interests and activities, providing support, and promoting their COAs' friend-making efforts. Healthcare professionals can also refer COAs to the appropriate sources for help or counseling. Several organizations are listed in the brochure for COA intervention/treatment referrals, self-help groups, and alcohol and other drug prevention information.

Materials for Patient Education

How To Take Care of Your Baby Before Birth/Cómo Cuidar a Su Hijo Antes Del Nacimiento

Year: 1991

Format: Brochure

Length: 4 Pages

Topic: Alcohol and Other Drugs and Prevention

Target Audience: Women

Setting: Healthcare

Readability: Easy

Inventory No: PH239A

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847; 1-800-729-6686

This brochure, ideal for physician waiting rooms, offers tips on how pregnant women can take care of their baby before birth. It advises women not to use alcohol, tobacco, or other drugs while pregnant and to speak with a doctor before taking any prescription or over-the-counter medications. Includes a brief listing of resources to contact for help when breaking an addiction.

For a Strong and Healthy Baby

Format: Brochure

Length: 6 Pages

Topic: Alcohol and Other Drugs and Prevention

Target Audience: Women and Healthcare Providers

Setting: Healthcare

Readability: Easy

Inventory No: PHD603

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847; 1-800-729-6686

This brochure explains the effects that alcohol, tobacco, and other drugs have on the developing fetus. It lists steps that pregnant women should take to ensure their baby's health and gives ideas for coping with stress and anxiety. A collection of resources for additional help is also included.

Using Your Medicines Wisely: A Guide for the Elderly

Year: 1992

Format: Booklet

Length: 27 Pages

Topic: Alcohol and Other Drugs and Prevention

Target Audience: Elderly

Setting: Home and Community Organization

Readability: Average

Inventory No.: PHD500

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847; 1-800-729-6686

This booklet, designed for the elderly, explains the importance of "using your medicines wisely." It asks readers to take responsibility for their own health-care by obtaining clear information from doctors and pharmacists and organizing a system for taking medicines. A pull-out chart is included to help readers keep track of emergency numbers and medications used.

Moving Forward with Your Life: Leaving Alcohol and Other Drugs Behind

Year: 1993

Format: Brochure

Length: 8 pages

Topic: Alcohol and Other Drugs and
Intervention/Treatment

Target Audience: General Public, Parents,
and Sr. High Youth

Setting: Healthcare

Readability: Average

Inventory No.: PHD626

Availability: National Clearinghouse for
Alcohol and Drug Information, P.O. Box
2345, Rockville, MD 20847; 1-800-729-6686

This brochure begins by describing several people's drinking and drug habits, reasons for denial, and the importance of recognizing when one has an alcohol or other drug problem. Common characteristics of people with drinking problems are listed, as well as self-help groups, national non-profit organizations, and government resources. This publication encourages those with substance abuse problems to get the help they need and to realize that they are not alone.

Tips for Teens

Year: 1993 and 1994

Format: Brochure

Length: 2 Pages

Topic: Variety, see below

Target Audience: Jr. High and Sr. High Youth

Setting: Schools and Community
Organizations

Readability: Easy

Inventory No.: See Below

Availability: National Clearinghouse for
Alcohol and Drug Information, P.O. Box
2345, Rockville, MD 20847-2345;
1-800-729-6686

Each of these colorful trifold brochures contain facts and resources on the following subjects: alcohol (PH323), crack and cocaine (PHD640), hallucinogens (PHD642), inhalants (PHD631), marijuana (PHD641), and smoking (PHD633). Designed to attract attention and concern, the brochures state the long-term and short-term effects, physical and psychological risks, impact on sexual performance, and legal implications. Teens are advised to stay away from all drugs and encouraged to seek help from a counselor, friend, or parent whenever necessary.

Studies, Articles, & Reports for Healthcare Providers

Government Publications and Journal Articles

Model Curricula for Alcohol and Other Drug Abuse Physician and Nurse Education

Report, November 1989, 50 pp.

(Available from the National Clearinghouse
for Alcohol and Drug Information, P.O.
Box 2345, Rockville, MD 20847.)

The National Institute on Alcohol Abuse and Alcoholism (NIAAA) and the National Institute on Drug Abuse (NIDA) are jointly sponsoring a program to develop and demonstrate effective models for integrating alcohol and other drug abuse teaching into the medical and nurse education curricula. The model curricula are based upon discipline-specific knowledge and skill objectives and address undergraduate, graduate, residency, and faculty training needs. Within medicine, curriculum models are being developed for the following specialties: general internal medicine, family medicine, psychiatry, pediatrics, and OB/GYN. Within nursing, curriculum models are being developed for undergraduate core courses and for graduate nursing specialties. Each project includes the following components: 1) use of a faculty working committee to assess alcohol and other

drug abuse instructional needs and develop curriculum objectives; 2) development of curriculum materials and pilot testing of a selected segment of the curriculum; and 3) a 14-month implementation and evaluation phase. Descriptions of the 12 model curriculum projects are presented in this publication.

Alcohol and Other Drug Abuse Curricula for Medical and Nursing Education

Report, National Institute on Alcohol Abuse and Alcoholism and the National Institute on Drug Abuse, 1993

(Available from Scientific Communications
Branch, NIAAA, 6000 Executive
Boulevard, Rockville, MD 20892.)

During the past decade, many medical and nursing educators and specialty organizations have developed curriculum materials on alcohol and other drug abuse for use in undergraduate, graduate, and continuing education programs. This resource directory is designed to assist health professions faculty to integrate substance abuse teaching into their ongoing instructional activities. The curricula listed in this directory include a broad spectrum of instructional materials that can be used in primary care and specialty teaching settings. These materials include instructional units that can be offered as a single teaching session or combined to form a comprehensive substance abuse curriculum.

Directory of Projects: Faculty Development Program in Alcohol and Other Drug Abuse

Rockville, MD: Center for Substance Abuse Prevention, October 1993

(Available from Judith A. Alamprese, COSMOS Corporation, 1735 Eye Street, NW, Suite 613, Washington, DC 20006.)

The Health Professions Clinical Training Program in Alcohol and Other Drug Abuse, referred to as the Faculty Development Program (FDP), was established in 1989 by the Center for Substance Abuse Prevention (CSAP), the National Institute on Alcohol Abuse and Alcoholism (NIAAA), and the National Institute on Drug Abuse (NIDA). The FDP, as part of CSAP's Training System, seeks to improve clinical teaching about alcohol, tobacco, and other drug abuse by offering training to academically based clinical faculty in primary healthcare and mental health. The FDP funds grants in 35 institutions, including 16 schools of medicine, 11 schools of nursing, 7 schools of social work, and 1 graduate psychology department. The purpose of this program is to develop a cadre of academically based health professions faculty who will provide leadership, within their clinical specialties and departments, in alcohol, tobacco, and other drug abuse training. This directory contains summaries of the 35 projects in the FDP and a listing of all participants in these projects. The summaries and participant list are organized within four professional fields included in the FDP: medicine, nursing, social work, and psychology. It is intended that the directory serve as a resource for FDP participants and for others who work with or are interested in the program.

Targets for Change in Alcohol and Drug Education for Nursing Roles

Naegle, M. A.

Alcohol Health and Research World
13(1):52-55, 1989

(Available from the National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847.)

Nursing roles must adapt to changes in health needs and treatment trends to provide responses to society's healthcare needs. Nurses, as the largest group of healthcare providers, have the greatest contact with clients and patients in the widest variety of settings. Changes have been slow in the three active components of alcohol and other drug abuse education considered essential to advancing professionalism in nursing: (1) changes in attitude; (2) acquisition of information; and (3) development of skills. These areas are addressed.

Nurse Educators Look at Alcohol Education for the Profession

Heinemann, M. E., and Hoffman, A. L.

Alcohol Health and Research World
13(1):48-51, 1989

(Available from the National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847.)

In 1983, a national survey was designed and implemented to determine the extent to which nursing schools were meeting the needs of the nursing profession for information on alcohol and other drug abuse. One of the unexpected results of this nursing education survey was the discovery of an apparent discrepancy between: (1) to-

tal number of reported hours of instruction on alcohol and other drugs, and (2) the quantity of information and clinical skills identified as being included in this component of the curriculum. The highest percentage of schools used psychiatric and mental health nursing as the place in the curriculum for alcoholism and other drug abuse, reflecting the historic role of specialty wards for alcohol patients in State mental hospitals. Problems with this arrangement are discussed briefly.

Training Practicing Physicians: Recognition and Early Treatment of Alcohol and Other Drug Problems

Fishbein, H. A.; Berlin, N. J.; and Seitz, S.L.

Addiction and Recovery, November 1990

The National Training System (NTS), which is part of the Center for Substance Abuse Prevention (CSAP), is responsible for increasing recognition, prevention, and intervention for alcohol and other drug-related problems in the United States. They do this by developing and pilot testing curricula and other materials for professionals and community groups who have access to populations at risk. This article focuses on the NTS physician training initiative that reflects the assumption that attention to existing or potential AOD problems is an essential ingredient of good primary medical care. The NTS and the American Academy of Pediatrics (AAP) developed and tested a pediatrician training program. This article provides details of the program including the scope of the problem, the role of the pediatrician, interviewing guidelines, management

operations, and resources for treatment, referral, and followup. Nine physician organizations that observed the training agreed that physician awareness of AOD issues in the patient population was minimal and that motivating physicians to increase their involvement in this area was critical.

Evaluation of Substance Abuse Education Courses in Colleges of Pharmacy

Miederhoff, P. A., and Lyng, S.

Research Communications of Substance Abuse 11(3):135-151, 1990

(Available from Patrick A. Miederhoff, Virginia Commonwealth University, Medical College of Virginia, Richmond, VA 23928.)

A study was conducted to determine the effect of drug abuse education courses offered by schools and colleges of pharmacy on the attitudes and behavior of participants. A total of eight instructors in colleges of pharmacy that sponsor drug abuse education programs in seven geographic regions of the United States participated in data collection. The basic design consisted of pre- and post-test measures with treatment and social control groups. Subjects included 506 students enrolled in drug abuse education courses and 295 students who were not receiving any type of drug abuse education experience. Attitudes toward drug abuse, the dependent variable, were operationalized with the Measurement of Attitudes Toward Drugs (MAD). Other variables in the study were operationalized with a self-report confidential questionnaire. In addition to demographic variables, the subjects were asked to report their level of use of prescription, non-prescription,

and recreational drugs compared to others their age. The instructors of the courses were asked to provide information about class size, textbook used, and their academic backgrounds. The data suggest that individuals who choose to take undergraduate pharmacology courses tended to have greater empathy for people suffering from substance abuse problems and believed that rehabilitative approaches for dealing with these problems were preferable to more punitive approaches. The educational experience tended to enhance these attitudes.

Other Publications

Alcoholism Training for Social Workers

King, G., and Lorenson, J.

Social Casework 70(6):375-382, 1989

The authors discuss the credentialing program for alcoholism counselors in New York State, as well as effective treatment applications. Social workers are in an ideal position to identify, refer, and treat alcoholic patients; however, they need special training and specific work experience. In New York State, alcoholism counselor applicants are required to have at least 450 clock hours of relevant instruction, of which 150 hours must be specific to alcoholism counseling. In addition, they must document at least one full-time, employed year of providing alcoholism services in which counseling is practiced. Studies show that social workers as a group have been deficient in making early diagnoses and intervening with alco-

holic clients. Social workers should acquire specific skills including assessment and diagnosis, limit setting and leverage, client contracting to change drinking behavior, education on alcoholism, group treatment, family involvement in treatment, and self-help groups. It is noted that schools of social work increasingly recognize the importance of these skills and provide courses to prepare their graduates to work with individuals with alcohol and other drug problems. 21 Ref.

Educational Factors in Substance Abuse for Physicians

Johnson, N. P.; Lindsay, A. B.; and Tumblin, M.

Journal of the South Carolina Medical Association 86(1):64-65, 1989

(Available from N. Peter Johnson, University of South Carolina, School of Medicine, Department of Neuropsychiatry and Behavior Science, Office of Alcohol and Drug Studies, Columbia, SC 29208.)

The authors discuss current techniques used to upgrade physicians' skills on substance abuse with minimum investments of time and money. The basic premises are: (1) concern of the administrator engenders positive attitudes in students even in face of adversity; (2) students should have regular exposure to recovering individuals and ill patients; (3) alcoholism and drug addictions are treatable; (4) education reduces the severity of problems; (5) overprescription of medicine is a behavior that can be overcome in new generations of physicians; (6) early diagnosis makes treatment outcome easier; and (7) lectures are least likely modes of change, but the time constraints make them necessary. The authors also

emphasize research because learning is increased when students are involved in research. Administrative benefits include employment and resource persons. Student activities contribute to involvement after graduation.

Current Status of Psychiatric Education in Alcoholism and Drug Abuse

Galanter, M.; Kaufman, E.; Taintor, Z.; Robinowitz, C. B.; Meyer, R. E.; and Halikas, J.

American Journal of Psychiatry 146(1):35-39, 1989

(Available from Dr. Marc Galanter, Division of Alcoholism and Drug Abuse, Department of Psychiatry, New York University School of Medicine, 550 First Avenue, New York, NY 10016.)

The authors conducted a survey of psychiatric education in alcoholism and drug abuse in the United States. Ninety-seven percent of 106 undergraduate training programs and 91 percent of 169 residency programs offered curriculum units in this field. Most of these programs also provided supervised clinical care. Areas of reported faculty dissatisfaction included problems with attitude and interest of psychiatric faculty and with the amount of curriculum time allotted. The authors conclude that although the amount of curriculum time devoted to training in alcoholism and drug abuse is growing, further investment in developing faculty and fellowships is warranted to increase the quality of teaching commitment.

Specialty Specific Model: To Develop, Implement and Evaluate a Model Program and Curriculum in Alcohol and Drug Abuse in Family Medicine. Final Report

Report, Society of Teachers of Family Medicine, Kansas City, Missouri, April 1, 1989

(Available from Society of Teachers of Family Medicine, 8880 Ward Parkway, Box 8729, Kansas City, MO 64114.)

Successful faculty development strategies in family medicine incorporate elements ensuring sustained vitality and interest beyond the program. In accordance with these principles, 10 family physician faculty members from around the country were selected to undergo a 1-year faculty development fellowship program in substance abuse. Sponsored by the Society of Teachers of Family Medicine (STFM), the goal of the program was not only to develop the faculty members, but also to have impact on both the fellows' institutions and on the speciality of family practice. The program incorporated a combination of off-site group instruction and home-site individual curriculum projects. Additional essential features of the program were socialization activities aimed at the development of formal and informal links within family practice and with other medical specialties and exchange of resources and materials among participants. Program evaluation findings indicate that this program was very effective in fostering networking among fellows, maintaining their enthusiasm, and promoting their academic commitment to substance abuse. The resulting formation of an active, viable STFM Substance Abuse Working Group attests to the strength

of both the networking and the commitment among fellows that were fostered by the program. The fundamental features of this program may be applicable to smaller, more localized groups such as faculty within institutions or within regionally based groups or committees.

Workshop Approach To Provide Substance Abuse Education to Pharmacy Students

Stuck, C., and Shible, L.

AMERSA Substance Abuse 12(4):210-215, 1992

(Available from AMERSA, Brown University, Center for Alcohol and Addictions Studies, Box G, Providence, RI 02912.)

Data on the incidence of alcohol and other drug use among students and of serious consequences, including academic and professional impairment, indicates that pharmacy students have good reason to be concerned about their own vulnerability. A recent survey of pharmacy faculty revealed that two-thirds of the respondents believed current curricular content about alcohol and other drug abuse was not adequate. An ongoing program of education and awareness concerning substance abuse was developed. A 3-hour workshop was proposed to increase students' understanding of alcoholism/addiction, to enable them to recognize behaviors in individuals at risk for chemical dependency, to help them recognize enabling behaviors, to develop alternatives to enabling behaviors, and to increase students' awareness of resources that help students and pharmacists. An evaluation of the program found that the students found all components of the workshop to be helpful. 12 Ref.

Doctors Lack Adequate Training in Substance Abuse

Drug Abuse Update Summer, 1992

A new study shows that medical schools are failing to teach doctors how to treat substance abuse. Doctors have been shown to be biased against drug abusers and think of them as difficult patients. Doctors are not totally comfortable with the fact that addiction is a chronic disease, a disease with signs and symptoms and set causes. It is recommended that medical schools provide formal training in substance abuse for every medical student.

Guidelines for Facilities Treating Chemically Dependent Patients at Risk for AIDS or Infected by HIV

Report, American Society of Addiction Medicine, April 1991

(Available from ASAM, 5225 Wisconsin Avenue, NW, Suite 409, Washington, DC 20015.)

The American Society of Addiction Medicine (ASAM) presents guidelines to help staff members working in chemical-dependency treatment programs to respond effectively, safely, and humanely to the needs of patients with HIV/AIDS or who are at high risk for HIV infection. Topics discussed include principles for treatment and housing, the spectrum of services needed, precautions that should be taken by caregivers, special considerations for programs with child care services, HIV-antibody testing, pre-test counseling, post-test counseling, symptoms of HIV infection, other infections among intravenous drug abusers, rationale for addictions treatment, residential treatment philoso-

phy, significant other, and legal concerns. ASAM believes it is important for members of the chemical dependency treatment community to respond in the manner outlined because: (1) it is medically imperative for people at risk for or already diagnosed with AIDS to stop using chemicals that can affect the immune system and impair judgment, (2) there is great potential for limiting the occurrence of opportunistic infections and the progression of HIV disease if early medical intervention is instituted, (3) it is important to limit the spread of HIV infection by helping patients reduce high-risk behavior, and (4) there is a need to improve the biopsychosocial quality of life of people with HIV/AIDS.

American Society of Addiction Medicine News

Newsletter

(Available from ASAM, 5225 Wisconsin Avenue, NW, Suite 409, Washington, DC 20015.)

The American Society of Addiction Medicine newsletter presents a variety of topics of interest to addictions healthcare professionals. Some of these include: adolescents and AIDS, clinical case reports about managed care and insurance problems, the first national survey of physicians' drug use, listings of professional education courses and meetings, a list of new members, ethics and the practice of addictions medicine, biographies, international activities, and a calendar of coming events.

Seminars Not Enough: Addiction Training for Psychologists

Kent, D., and Baker, L.

Alcoholism and Drug Abuse Weekly, July 15, 1992

The authors contend that psychologists need a multidimensional perspective on addictions treatment. Psychologists have been on the fringes of the addiction treatment field, lacking the proper training and effective education in this area. It is suggested that psychologists need to recognize the biochemical basis of addiction and still be willing to treat addicted persons using a mainstream approach.

Getting Doctors To Diagnose Substance Abuse Problems

Strategies 1(2):10, 1992

One problem with getting a person with a substance abuse problem into early treatment is that physicians often do not diagnose the problem. Physicians need better training to screen patients for substance abuse problems, especially early on so that appropriate interventions can be made. Physicians active in coalitions can play an important role by working to train other doctors as well as medical students to be aware of alcohol and drug abuse problems in clinical practice. The Association for Medical Education and Research in Substance Abuse (AMERSA), an organization made up of physicians, nurses, and social workers who teach in medical schools around the country, encourages a multidisciplinary

nary approach to the recognition, diagnosis, intervention, treatment, and prevention of substance abuse.

Substance Abuse Teaching in a Community Psychiatry Setting: An Integrated Chemical Dependency Curriculum for Psychiatry Residency Training

Ronis, R. J.

Substance Abuse 13(3):112-116, 1992

The author's experience in the initial year of a newly developed community psychiatry program, the Public Academic Liaison program at University Hospitals in Cleveland, confirms a high comorbidity of chronic mental illness and chemical dependency. Advanced psychiatry residents without focused training in screening and identification of substance abuse noted substance abuse problems in almost 50 percent of their inner city community mental health center patients. Unfortunately, identification seldom led to direct treatment recommendations or referrals consistent with the diagnosis. This article outlines a multiphase training program for psychiatry residents. The author hopes that the integrated curriculum will lead to greater identification, more appropriate treatment and referral, and improve expectation for treatment outcome of the mentally ill substance abuser.

Evaluating Faculty Development and Clinical Training Programs in Substance Abuse: Guide Book

Klitzner, M., and Stewart, K.

Bethesda, MD: Pacific Institute for Research and Evaluation, 1990

(Available from the National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847.)

An overview of program evaluation is presented as it applies to the evaluation of faculty development and clinical training programs in substance abuse for health and mental health professional schools. Conceptual issues in program evaluation are discussed, including the uses of evaluation, the major options, and the benefits and risks of conducting evaluation studies. An introduction is provided to research methods, including discussions of sampling, statistical power, the validity of evaluations and potential sources of bias, comparison and control groups, and measurement of outcomes. The information presented is to enable program developers and other faculty to work as partners with evaluators in the development of evaluation designs that meet the specialized needs of faculty development and clinical training programs.

Challenges to Health Professional Education in Substance Abuse in the 1990s

Chappel, J. N.

AMERSA Substance Abuse 13(4):219-225, 1992

The author discusses his views of the treatment of alcohol and drug dependence and how these views have changed since he first entered the field of addiction medicine almost 30 years ago. Despite the many advances in the field of addiction psychiatry, stigma, prejudice, and resistance still pose a challenge to healthcare professionals. In meeting the challenges of resistance and recovery, healthcare professionals have a long road ahead of them, according to the author. He suggests speeding up the process by defining and teaching recovery supportive skills, which include early identification and diagnosis, combined with motivation for the addicted person to enter treatment; detoxification that educates and motivates the patient to begin working on recovery; prescribing to prevent iatrogenic addiction, relapse, and to enhance recovery; psychotherapy to intervene on and motivate patients to enter and work on recovery; and teaching the knowledge and skills necessary for healthcare professionals to work effectively with 12-step programs.

Chemical Dependency in Nursing: The Deadly Diversion

Sullivan, E.; Bissell, L.; and Williams, E.

Reading, MA: Addison-Wesley Publishing, 1988, 196 pp.

(Available from the Addison-Wesley Publishing Corporate and Professional, 1 Jacob Way, Reading, MA 01867.)

This book discusses the problem of chemical dependency in the nursing profession and offers practical, hands-on help. *Chemical Dependency in Nursing* presents information on how to identify a chemically dependent nurse, how and when to intervene, how to locate effective treatment, and how to handle legal

and ethical issues in drug testing. Screening tests, model programs, and resources are also included.

Groups, Organizations, & Programs for Healthcare Providers

Adult Children of Alcoholics

P.O. Box 3216
Torrance, CA 90510
310-534-1815

AIDS Hotline

1-800-342-AIDS

Al-ANON Family Groups, Inc.

World Service Office
P.O. Box 862, Midtown Station
New York, NY 10018
1-800-344-2666

Alcoholics Anonymous

World Service Office
475 Riverside Drive
New York, NY 10115
212-870-3400

American Medical Student Association

Adolescent Substance Abuse
Prevention
1890 Preston White Drive
Reston, VA 22091
703-620-6600

American Society of Addiction

Medicine, Inc. (ASAM)
5225 Wisconsin Avenue, NW
Suite 409
Washington, DC 20015
202-244-8948

Association of Medical Education and Research in Substance Abuse (AMERSA)

Center for Alcohol Studies
Brown University
Box G-BH
Providence, RI 02912
401-863-7791

Center for Disease Control and Prevention

National AIDS Clearinghouse
P.O. Box 6003
Rockville, MD 20849-6003
1-800-458-5231

Center for Substance Abuse Treatment

Drug Abuse Information and
Treatment Referral Hotline
1-800-662-HELP

Doctors Ought to Care, Inc. (DOC)

5510 Greenbriar Street, Suite 235
Houston, TX 77005
713-798-7729

Hazelden Educational Materials

P.O. Box 176
Center City, MN 55012
1-800-328-9000

Johnson Institute

7205 Ohms Lane
Minneapolis, MN 55439-2159
1-800-231-5165

Marin Institute for the Prevention of
Alcohol and Other Drug Problems
24 Belvedere Street
San Rafael, CA 94901
415-456-5692

Narcotics Anonymous
P.O. Box 9999
Van Nuys, CA 91409
818-780-3951

National Association of Perinatal
Addiction Research Education
(NAPARE)
11 East Hubbard, Suite 200
Chicago, IL 60611
312-541-1272 (Publications)
1-800-638-BABY (Phone Counseling)

National Clearinghouse for Alcohol and
Drug Information
P.O. Box 2345
Rockville, MD 20847-2345
301-468-2600
1-800-729-6686

National Clearinghouse for Primary
Care Information
8201 Greensboro Drive, Suite 600
McLean, VA 22102
703-821-8955, ext. 600

National Council on Alcoholism and
Drug Dependence, Inc.
12 West 21st Street
New York, NY 10010
212-206-6770
1-800-NCA-CALL

Office on Smoking and Health
3005 Rhodes Building (Koger Center)
Chamblee, GA 30341
404-488-5705

Rational Recovery Systems
P.O. Box 800
Lotus, CA 95651
916-621-2667

Secular Organizations for Sobriety (SOS)
P.O. Box 5
Buffalo, NY 14215
716-834-2922

The National Organization on Fetal
Alcohol Syndrome (NOFAS)
1815 H Street, NW
Suite 710
Washington, DC 20006
202-785-4585
1-800-66-NOFAS

Women for Sobriety
P.O. Box 618
Quakertown, PA 18951
1-800-333-1606

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